

MEMORANDUM

Agenda Item No. 11(A)(13)

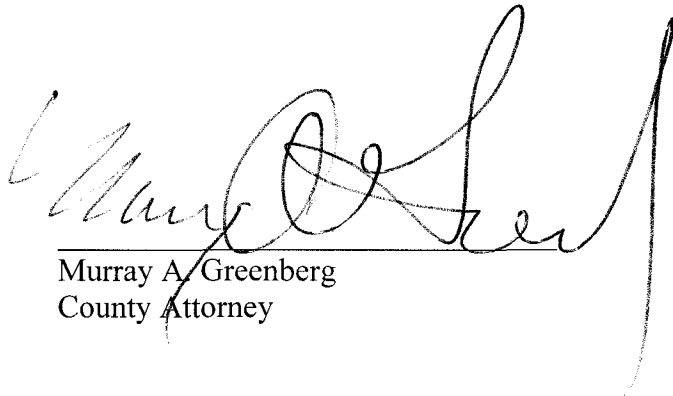
TO: Honorable Chairman Joe A. Martinez
and Members, Board of County Commissioners

DATE: June 6, 2006

FROM: Murray A. Greenberg
County Attorney

SUBJECT: Resolution Retroactively
Authorizing In-Kind
Services from the Park and
Recreation Dept. and Water
and Sewer Dept. for the
May 5-6, 2006 Homestead
Relay for Life Sponsored by
The American Cancer Society,
A Not-For-Profit, In An
Amount Not to Exceed
\$4,831.00

The accompanying resolution was prepared and placed on the agenda at the request of
Commissioner Dennis C. Moss.



Murray A. Greenberg
County Attorney

MAG/dc



MEMORANDUM

(Revised)

TO: Honorable Chairman Joe A. Martinez
and Members, Board of County Commissioners

DATE: June 6, 2006

FROM: Murray A. Greenberg
County Attorney

A handwritten signature in black ink, appearing to read "Murray A. Greenberg", is written over the printed name.

SUBJECT: Agenda Item No. 11(A)(13)

Please note any items checked.

- ☐ "4-Day Rule" ("3-Day Rule" for committees) applicable if raised
- ☐ 6 weeks required between first reading and public hearing
- ☐ 4 weeks notification to municipal officials required prior to public hearing
- ☐ Decreases revenues or increases expenditures without balancing budget
- ☐ Budget required
- ☐ Statement of fiscal impact required
- ☐ Bid waiver requiring County Manager's written recommendation
- ☐ Ordinance creating a new board requires detailed County Manager's report for public hearing
- ☐ Housekeeping item (no policy decision required)
- ☐ No committee review

Approved _____ Mayor
Veto _____
Override _____

Agenda Item No. 11(A)(13)

06-06-06

RESOLUTION NO. _____

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT AND THE MIAMI-DADE WATER AND SEWER DEPARTMENT FOR THE MAY 5-6, 2006 HOMESTEAD RELAY FOR LIFE SPONSORED BY THE AMERICAN CANCER SOCIETY, A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$4,831.00 TO BE FUNDED IN PART FROM THE DISTRICT 9 IN-KIND RESERVE FUND AND IN PART FROM THE WATER AND SEWER DISTRICT BUDGET

WHEREAS, the American Cancer Society has requested in-kind services from the Miami-Dade Park and Recreation Department and the Miami-Dade Water and Sewer Department for the May 5-6, 2006 Homestead Relay for Life in an amount not to exceed \$4,831.00 (see attached Fee Waiver/In-Kind Service Application); and

WHEREAS, the American Cancer Society is a not-for-profit organization; and

WHEREAS, the Relay for Life is a district event, and \$791.00 of the in-kind services shall be funded from the District 9 In-kind Reserve Fund and \$4040.00 of the in-kind services shall be funded from the Water and Sewer District Budget,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA, that this Board retroactively authorizes in-kind services from the Miami-Dade Park and Recreation Department and the Miami-Dade Water and Sewer Department for the May 5-6, 2006 Homestead Relay for Life in an amount not to exceed \$4831.00 to be funded in part from the District 9 In-kind Reserve Fund and in part from the Water and Sewer District Budget.

The foregoing resolution was sponsored by Commissioner Dennis C. Moss and offered by Commissioner _____, who moved its adoption. The motion was seconded by Commissioner _____ and upon being put to a vote, the vote was as follows:

Joe A. Martinez, Chairman	
Dennis C. Moss, Vice-Chairman	
Bruno A. Barreiro	Jose "Pepe" Diaz
Audrey M. Edmonson	Carlos A. Gimenez
Sally A. Heyman	Barbara J. Jordan
Dorin D. Rolle	Natacha Seijas
Katy Sorenson	Rebeca Sosa
Sen. Javier D. Souto	

The Chairperson thereupon declared the resolution duly passed and adopted this 6th day of June, 2006. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA
BY ITS BOARD OF
COUNTY COMMISSIONERS

HARVEY RUVIN, CLERK

By: _____
Deputy Clerk

Approved by County Attorney as
to form and legal sufficiency.

DDC

Diamela del Castillo

MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION

COUNTY FEE WAIVERS OR IN-KIND SERVICES REQUESTED THROUGH THIS PROCESS ARE NOT EFFECTIVE UNTIL APPROVED BY ACTION OF THE BOARD OF COUNTY COMMISSIONERS PURSUANT TO THE MIAMI-DADE COUNTY HOME RULE CHARTER

Please complete the following form and submit completed form along with requested materials, if applicable to.

Special Events Staff
Communications Department
111 N.W. 1st Street, Suite 2510
Miami, FL 33128

Phone: (305) 375-2836
Fax: (305) 375-3968

Type of Event/Application (select one of the following):

- ☐ District Event - Event of minimal impact related to specific commission district (Complete questions 1-7, sign and date; copy will be submitted to the appropriate District Commissioner within two days of receipt of application.)
- ☐ Small Event - Event of minimal impact not necessarily related to a specific commission district. (Complete questions 1-7, sign and date.)
- ☒ Special Event - Event with expected attendance of less than 5,000 with localized impact limited to an individual community or municipality (Complete questions 1-12, sign, date and submit form no later than 30 days prior to event date.)
- ☐ Major Event - Large Event with expected attendance of over 5,000 or significant probability of protests, controversy, violence or vandalism (Complete questions 1-12, sign, date and submit form no later than 11:0 days prior to event date.)

1. Full legal name of the requesting organization: AMERICAN CANCER SOCIETY
2. Applicant Status: (Select one of the choices below)

- ☒ Not-For-Profit or Tax Exempt ☐ Local Government or Public Entity
- ☐ For-Profit
- ☐ County Sponsored Event/Sponsoring Department _____
- ☐ Other (specify): _____

3. Name and contact information for single point of contact (address, phone, fax, e-mail address, etc.): MISTI ALDERS
3901 NW 79th AVE, SUITE 224 MIAMI, FL 33166 phone: 305.719.2894, fax: 305.592.5140
email: misti.alders@cancer.org

4. Specify fee waiver or in-kind service requested (quantity, if applicable): Large new snowmobile, sound system, 4 small
light towers, 10 golf carts if not available, a large stage 24'x40'

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): RELAY FOR LIFE OF
HOMESTEAD; MAY 5-6, 2006, (an overnight event for teams to raise money for the ACS
Mission and celebrate survivors. Beneficiaries of the money raised are those interested in knowing
more about: cancer, treatments, etc. by calling 1.800.ACS.2345 or visiting: www.cancer.org - cancer
patients and their families (Hope Lodge stays, Look Good Feel Better program, R.O.C.K. Camp for kids and
R.O.C.K. Family Weekends); cancer survivors (R.O.C.K. scholarship); researchers.

6. Please select ALL that apply to event:

- ☐ Economic Development: Event supports vitality or growth of the local economy
- ☐ Youth/Education: Event benefits youth of any age and/or offers educational benefits
- ☒ Health and Social Services: Event supports health-related causes and/or social programs or institutions that improve quality of life within the community
- ☐ Arts and Culture: Event supports music, theatre, literature, art or culture
- ☐ Environmental: Event benefits environmental concerns or promotes conservation
- ☐ Sports and Athletics: Event supports/promotes organized sports or recreational participation

7. Physical address of event venue(s) (please specify Commission District(s)): HOMESTEAD SPORTS COMPLEX (AKA
BASEBALL STADIUM) 1601 SE 28th AVE., HOMESTEAD, FL 33035

MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION

8. Description of regional or local impact: Brings community together for a cause that affects everyone: cancer. Goal for Miami-Dade county is to raise \$1,103,000 -- this particular event is goal'd at \$50,000.
9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): The event is scheduled from 6pm - 12 noon the following day. Delivery of the showmobile should be by 4pm (NO LATER), pick-up at 12 noon is fine.
10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): The site map is not yet complete, but there will be someone on-site to direct the county employees with set-up.
11. Expected number of participants and estimated attendance (per day, if applicable): 700-1,000
12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): See attached

I hereby certify that all the statements made in this application are true and correct.

Marti Anders
Signature of Authorized Representative

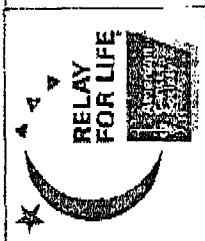
10 MAR 06
Date

See K
H-litel is
available
3/30/06 Thank you

UNIT: Miami-Dade
SITE: Homestead
DATE: 21-22APR06
STAFF PARTNER: Miss Alders

RELAY FOR LIFE

2005/2006 BUDGET PLANNING FORM



INCOME CODE: 2005/06 Net Income: \$69,000 2005/06 Sponsorship Goal: \$1,652
2005/06 Luminaria Goal: \$1,652
2005/06 Luminaria Total: \$1,652
2005/06 Luminaria Actual: \$1,652
2005/06 Luminaria Projected: \$1,652
2005/06 Luminaria YTD Income: \$1,652

Teams

This is built into your team money raised - you may increase this fee but the minimum must be \$100

\$100 Increase this fee but the minimum must be \$100

25 Please take from your PSE report

70% Overwrite this rate if yours is greater

16 *This is a formula - do not enter number

\$1,805 *This is a formula - do not enter number

\$23,038 Total \$ raised by all teams meeting large team criteria

3 Any team with 20+ team members and raising \$5,000+

3 *This should be the same as 2004/05

Teams

Team Commitment Fee

Total Teams 2004/05

Team Retention Rate

Returning Teams 2005/06

Team Average 2004/05

Large Team Money 2004/05

of Large Teams 2004/05

of Large Teams 2005/06

New Teams 2005/06

Team Income 2004/05

\$45,927 National Reporting Database

Sponsors

of Gold Level Sponsors 2005/06

of Silver Level Sponsors 2005/06

of Bronze Level Sponsors 2005/06

of Other Sponsors 2005/06

\$ Amt for Gold Level 2005/06

\$ Amt for Silver Level 2005/06

\$ Amt for Bronze Level 2005/06

Total \$ Amt for 'Other Sponsors' 2005/06

Luminaria

of Luminaria Sold 2004/05

332 \$ Raised in Luminaria Income 2004/05

\$1,652

Summary

Total Income

Total Expense

Total Profit

**MIAMI-DADE PARKS & RECREATION DEPT.
SHOWMOBILE, STAGES, BLEACHERS, SOUND & PRODUCTION
305-257-0933 Ext: 240/305-257-1083 (F)**

EQUIPMENT CONFIRMATION FORM

ORGANIZATION/AGENCY: Office of Commissioner Dennis C. Moss, Vice-Chairman

EQUIPMENT REQUESTED: Large New Show mobile (if not Large Stage 24 x 40) & 4 Light Towers

NAME OF PERSON RESPONSIBLE FOR THIS BILL: Dennis C. Moss

BILLING ADDRESS/ ZIP CODE: 111 N.W. 1st Street, Suite 320, Miami, Florida 33128

NAME/TITLE OF THE EVENT: American Cancer Society Relay for Life "A night of movie magic"

ADDRESS OF EVENT: Homestead Sports Complex 1601 SE 28 Avenue

TODAY'S DATE March 30, 2006 DATE (S) OF EVENT: May 5-6, 2006

SET-UP TIME & DAY: May 5 @

TAKE-DOWN & DAY: May 6 @

CONTACT PERSON/PHONE: Misty Alders 779-2854

AT SITE CONTACT/CELL PHONE #: Misty Alders 779-2854

SPECIAL INSTRUCTIONS: Direction Item(s) are to be placed, maps, diagrams, etc.

Please contact organization for special Instructions.

OTHER INFORMATION: Include additional equipment if needed.

Please see attached request letter.

We, the users, understand that we assume full responsibility for any damage, theft, or loss to said equipment and its accessories between the time the Miami-Dade Park and Recreation Department completes setting up and the time it takes down. We, the users, also agree to adhere to the requests set forth in the rental policy. We do have a copy of the rental policy and fully understand the requirements set forth in renting the equipment requested as out-lined in the rental policy. We also understand that the total fee is to be remitted (5) five working days before the event.

*Fee

Signature

*(SEE FEE SCHEDULE FOR EXACT CHARGES)

Agency/Group

**CANCELLATIONS MUST BE MADE 72 HOURS IN ADVANCE OF THE
EVENT BY FAX OR EMAIL OTHERWISE EXPECT TO BE CHARGED
½ (HALF) OF RENTAL FEE.**

***There will be no completed reservation on the schedule unless the confirmation
Form is filled out completely and signed.**

☒ In-Kind ☐ Budget Allocation

MAR-31-2006 FRI 03:36 PM

FAX NO.

P. 12/17
P. 02**Miami-Dade Water and Sewer Department**

Public Affairs Section

3071 SW 38 Avenue, Suite 539

Miami, Florida 33146

Phone: 786-552-8088 Fax: 786-552-8634

~~8087~~**Light Towers Proposal**

This form must be completed and faxed to 786-552-8634 before the use of any light towers.

An invoice will be sent after the event.

Requestor's Name: American Cancer Society Phone: 779-2854
Organization/Entity: Misty Alders, 554-4363 512-5140Person Responsible for Payment: Dennis C. Moss Phone: 315-4832Organization/Entity: Board of County CommissionersBilling Address: 111 NW 1st, Suite 320City: Miami State: FL Zip Code: 33177Name of Event: American Cancer Society Relay for LifeContact Person: Misty Alder Phone: 779-2854Address of Event: Homestead Sports Complex 11601 SE 28 Ave.Date Event Begins: May 5th Date Event Ends: May 6thNumber of Towers: 4 (each tower covers approximately half a football field or approximately 50 yards)

To be filled in by WASH personnel.

FEES: A flat per day fee will be billed based on the costs per tower for personnel/labor and vehicles/equipment. Any unforeseen circumstances may be billed as an additional charge. In addition, the cost of repairs or replacement for any tower(s) that are damaged or stolen will be billed to the person/organization (responsible party) for payment.

Rate for each day: \$ 505.00 per tower x 4 x 2 = \$ 4,040
Number of towers Number of days Total Due

I hereby agree to pay the fees stated above. I understand this is a proposal and an invoice will be sent after the event with the exact fees. The responsible party will additionally be responsible for all damages done to said light towers, or arising out of the use of said light towers, regardless of fault, or lack thereof, of the responsible party. The responsible party shall promptly reimburse Miami-Dade Water and Sewer Department for any and all damages done to said light towers while said towers are in the custody or control of the responsible party.

Authorized Signature - Person Responsible for Payment

Title

Date

March 17, 2006

Dennis Moss
County Commissioner
District 9, Miami-Dade County Florida
111 N.W. First Street, Suite 320
Miami, FL 33128



Dear Commissioner Moss:

Your involvement in and commitment to, your large geographic district lead me to ask for your help with a very important upcoming community event: **Relay For Life** of Homestead. In its eighth year, this **Relay** is one of the older events in the Miami-Dade.

I am honored to be working with Steve Shiver and Cire Andino as the Event's Co-Chairs for 2006. They bring an enviable enthusiasm and drive to achieve the best with them to this year's theme "A Night of Movie Magic", which will take place over the course of 18 hours from May 5 - May 6, 2006 at the Homestead Sports Complex. The City of Homestead, and its people have rallied in support of the event and this charismatic duo.

The challenge we face is to keep the event expenses to no more than \$5,000, or 10% of the net fundraising goal of \$50,000. As you understand, this amount can be spent quite quickly by the large, logistical expenses involved in the use of a stage, sound system, portable lighting, port-o-potties, signage, etc. Anything that you are able to do with your discretionary funds, or fee waivers, in order to cut these necessary costs is greatly appreciated and will contribute significantly to the success of this event.

As an elected official, you know the importance of being seen in, and participating in your diverse community. We would be honored if you would attend the Opening Ceremony when we celebrate the Survivors of cancer, or the Closing Ceremony when the total fundraising dollars are announced, and the Survivors walk the last lap around the track. It would be wonderful to openly recognize your contributions to the community, and the event, at this time.

We look to you for this critical support and generous donation of equipment from the County so as to not have the expense of renting. I have attached a copy of the Fee Waiver/In-Kind Services Application for your reference, and look forward to a favorable response from you.

Sincerely,

A handwritten signature in black ink that reads "Misti Alders".

Misti Alders
Community Representative

American Cancer Society, Miami-Dade Unit
3901 NW 79 Avenue, Suite 224, Miami, FL 33166
Misti.Alders@cancer.org phone: 305.779.2854

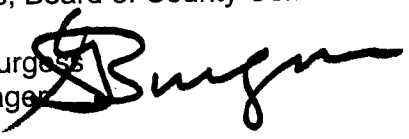
AH: 514-4363

Memorandum



Date: June 6, 2006

To: Honorable Chairman Joe A. Martinez
and Members, Board of County Commissioners

From: George M. Burgess
County Manager 

Subject: District Specific In-Kind Request Recommendation

The Office of Strategic Business Management (OSBM) has reviewed the attached in-kind request and recommends for the item to move forward to the Board of County Commissioners for consideration. The district specific in-kind reserve balance allows for the funding of this request.

Background

A retroactive waiver for in-kind services is being requested by a not-for-profit organization American Cancer Society for their Homestead Relay for Life held on May 5-6, 2006.

In-kind services have been requested in an amount not to exceed \$791 from the Park and Recreation Department for use of the show mobile and \$4,040 from the Water and Sewer Department for use of four light towers for a total in-kind request of \$4,831. The in-kind services provided by the Water and Sewer Department do not affect the in-kind reserve. The in-kind services from the Park and Recreation Department will be funded from the District 9 district specific in-kind reserve.

In FY 2005-06 the American Cancer Society has received a total of \$23,214 in in-kind services for Relay for Life events throughout the Miami-Dade County. The District 11 district specific in-kind reserve sponsored \$5,351 for the Kendall event, District 10 sponsored from the countywide in-kind reserve \$12,251 for the Tropical Park event, and the District 8 district specific in-kind reserve sponsored \$5,612 for the events that took place at Palmetto Senior High School and Cutler Ridge Park.

inkind07306